THE SOCIETY OF THE NEW YORK HOSPITAL

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Created by Royal Charter in 1771 in the reign of King George III

THE ANNUAL REPORT OF THE MEDICAL DIRECTOR

OF

The New York Hospital-Westchester Division WHITE PLAINS, NEW YORK

1956



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HISTORICAL NOTE

The New York Hospital owes its inception and growth to the efforts of public-spirited citizens. In 1769, Dr. Samuel Bard, later Washington's personal physician, delivered an address at the King's College commencement exercises in Trinity Church on the occasion of the awarding of some of the first medical degrees in America. In this address he pointed out the vital need for a hospital in New York City. Interest was aroused among influential men and the Governor of the Province headed the subscription list which raised liberal funds for this purpose.

In 1771 a royal charter was granted by King George III to "the Society of the Hospital in the City of New York in America." Through the efforts of Dr. John Fothergill, an old friend and adviser of Dr. Bard in London, the Society also received gifts from English friends, and in 1772 was granted an allowance of 800 pounds by the Legislature of the Province. In 1773, the Governors of the Society purchased five acres of land on the west side of Broadway opposite Pearl Street, and the cornerstone of the hospital was laid by Governor Tryon of New York. Construction was begun immediately but in February, 1775, the interior of the building was almost completely destroyed by fire. Although rebuilding was started at once, it was soon halted by the outbreak of the War of Independence. The unfinished structure was used both as barracks and as a military hospital for wounded American soldiers.

Because of the confusion in civic affairs following the war, the hospital was not opened to civilians until January, 1791. From the beginning the Governors recognized that patients suffering from nervous and mental disorders were sick people and they were admitted into the same building with medical and surgical cases. In 1808 a separate building was erected on the hospital grounds to provide more adequately for the care of mental patients.

In 1810 the legislature of the new State of New York confirmed the original charter and the Society became "The Society of the New York Hospital."

In the years following it was found desirable to move the division for mental patients to a newly purchased piece of property on Bloomingdale Road, seven miles north of the City, where the Bloomingdale Asylum was built and opened in 1821. As the City continued to grow, this property was sold to Columbia University and other institutions, and the Bloomingdale Hospital was moved in 1894 to its present location in White Plains.

Since the construction of the original hospital buildings in White Plains, there have been extensive developments of the property, among which may be mentioned the following: the construction of Macy and Banker Villas for men patients; Brown Villa, Bard House and Bruce House for women patients; special occupational therapy buildings and gymnasia for both men and women patients; clinic buildings, including operating room unit and dental and X-ray laboratory units; a staff house, a student nurses' house, a staff house annex, and nine cor-

tages for physicians. In 1938 a modern building for physical therapy was constructed in connection with the men's department. In 1941 the Nichols Cottage, an air-conditioned building with accommodations for twenty disturbed women patients, was constructed and named in honor of Dr. Charles H. Nichols, medical superintendent of the hospital from 1877 to 1889. In 1954 the building for special therapies was opened enabling the hospital to treat more women patients. Two elevators were installed in the main building in 1955. The Thomas Eddy Education Building was completed in the fall of 1955 for the instruction of the affiliating student nurses. The outpatient department was dedicated on December 8, 1956 and opened to receive patients on January 1, 1957. Other sections of the hospital have been modernized by renovation, promoting the safety and medical care of the patients. A nine-hole golf course is available, and the grounds, 246 acres in extent, have been otherwise developed.

By vote of the Board of Governors of the Society on June 15, 1936, the name of the Bloomingdale Hospital was changed to "The New York Hospital-West-chester Division" in order to convey a clearer understanding than had hitherto prevailed of the relation of the hospital in White Plains to the Society of the New York Hospital.

THE SOCIETY OF THE NEW YORK HOSPITAL

FOR THE YEAR 1957

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Physician in Charge of Men's Department DONALD M. HAMILTON, M.D.

Physician in Charge of Outpatient Department WILLIAM K. MCKNIGHT, M.D.

Director of Laboratories and Internist Hollis E. Clow, M.D.

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Senior Assistant Psychiatrists

Allison Booth Landolt, M.D.

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Assistant Dental Surgeon
CHARLES F. BECK, D.D.S.

Head of Psychology Department MARY ALICE WHITE, Ph.D

Head of Social Service Department ELEANOR NEUSTAEDTER

^{*} Resigned December 20, 1956

[†] Appointed January 1, 1957

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Gynecology F.A.C.S.

Thomas C. Peightal, M.D., F.A.C.S.

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Walter Hopfmann

Chaplain
The Reverend David B. Weden



MAIN ENTRANCE

TIERAEL CORNELL UNIVERSIT MEDICAL COLLEGI THE TORK OILS

THE SOCIETY OF THE NEW YORK HOSPITAL NEW YORK HOSPITAL—WESTCHESTER DIVISION

To the Board of Governors of the Society of the New York Hospital:

I have the honor to present herewith the report of the New York Hospital—Westchester Division for the year ending December 31, 1956.

On December 8th the outpatient department was formally dedicated and in January 1957 the department was opened to receive patients. This is a milestone of progress, marking this Division's great step forward in increasing its services to the community of Westchester and enriching its program of teaching and research. The establishment of this department was made possible through the generous gift of \$312,000.00 from Mr. John D. Rockefeller, Jr.

The appeal for support of the beneficent work of the hospital initiated in 1947 has had a most favorable response during the past ten years. Repairs and replacements have been made, and in addition to the outpatient department, a new education building, a building for physical therapy, and living quarters for personnel have been added. In a later section of the report under the heading, NEEDS, there is a more detailed presentation of the needs of the hospital, including not only an increase in the service and charitable work, but expansion of our program of treatment, teaching and research.

ADMISSIONS

During the year 304 patients, 200 women and 104 men, were admitted for treatment. Preference was given to patients suffering from acute and recoverable psychiatric disorders. One hundred eighty-nine, or 62 per cent of the patients admitted, were under fifty years of age; 64, or 21 per cent, were under thirty. The great majority of patients were suffering from functional personality disorders. They were unable to perform effectively at school or at work and there was decreased efficiency in managing personal relationships in the family, in social groups and in the community. The individual patient was a lonely person and was in need of warm acceptance, help and understanding. The disorders developed from the temperament or make-up of the individual, aggravated by prolonged or acute conflicts and trying, stressful life situations. In the family background there were friction, misunderstandings and clashes of temperaments, which produced frustrations, feelings of hostility and marked uncertainty. In most instances the resistance was worn down by prolonged conflicts, but in some cases the acute symptoms were ushered in by sudden dramatic and traumatic situations such as a severe physical illness, death of a loved one or untoward events which made too great demands upon the individual's power of adjustment.

The patients reacted according to their constitutional make-up or temperament. Some became depressed, self-depreciatory, self-accusatory and slowed up in all their functions, while others in an attempt to manage life problems became overactive, overtalkative, and hyperemotional. Such disorders were classified as manic-depressive psychoses; 59, or 19 per cent of the patients admitted, were so diagnosed.

Many sensitive, tenderminded individuals under stress and strain were prone to misinterpret and project their difficulties. They developed elaborate trends of thought about themselves or the world. Many withdrew to shut out the misinterpreted environment. These disorders were designated as schizophrenic reactions; 88, or 29 per cent of the patients admitted, were diagnosed as suffering from schizophrenia.

Thirty-five, or 12 per cent, had psychiatric disorders associated with the climacterium or involutional period, these reactions representing an extreme exaggeration of the mental and psychological problems encountered at this period or life epoch.

The neurotic reactions such as anxiety, hysteria, fears, obsession and compulsions were the outstanding manifestations in 49, or 16 per cent of the patients admitted. They were greatly benefited by the supportive and encouraging efforts of a well-balanced program of activities in addition to psychotherapy. Many commented on their ability to live effectively with themselves, even with remnants of annoying complaints.

Twenty-six patients with alcoholic problems were admitted for treatment.

A few patients with organic and toxic and infectious difficulties were admitted. Some improved rapidly while a few others failed to respond.



ENTRANCE OUTPATIENT DEPARTMENT

DIAGNOSTIC GROUPING OF ADMISSIONS

	Men	Women	Total
Psychoses due to alcohol: Korsakoff's psychosis		1	1
Other types	2	2	4
Deskins with a selection to the	2	9	1.1
Psychoses with cerebral arteriosclerosis	2	9	11
Psychoses due to convulsive disorder (epilepsy) Epileptic clouded state		1	1
Senile psychoses:			
Simple deterioration	1	6	7
Depressed and agitated type		2	2
Involutional psychoses:			
Melancholia	17	11	28
Paranoid types		7	7
Psychoses due to other metabolic, etc., diseases:			
Alzheimer's disease		1	1
Psychoses due to new growth: With intracranial neoplasm	2		2
with intractaman neoplasm	2		-
Psychoses due to unknown or hereditary cause but asso-			
ciated with organic change: With multiple sclerosis		1	1
Will mariple sciences			
Manic-depressive psychoses:			
Manic type	1 3	3 5	4 8
Circular type	4	13	17
Mixed type	6	24	30
Dementia Praecox (Schizophrenia):			
Simple type	5	5	10
Hebephrenic type	1	2	3
Catatonic type	16	23	39
Paranoid type	17	18 1	35 1
Other types		1	1
Psychoses with psychopathic personality	2	10	12
Psychoneuroses:			
Hysteria	1	1	2
Reactive depression	2 11	6 28	8 39
Mixed psycholeuroses	11	40	39
Without mental disorder:			
Alcoholism	7	14	21
Drug addiction	3	4 2	7
Psychopathic personality	1	2	3

Two hundred fifty-eight, or 85 per cent of those admitted, came from New York City and the surrounding suburban area. Ninety-nine, or 35 per cent of the patients admitted, came from Westchester County, The hospital has continued to serve an increasingly greater number from the local area and with the outpatient department serving only Westchester County, the hospital will play a more important and dynamic role in maintaining and promoting mental health in its own community. Patients came from 17 States other than New York, and two from South America.

Two hundred thirty-four, or 77 per cent of the patients admitted, were received on their voluntary application. Fourteen younger patients were admitted on the application of their parents. Two patients were received on physician's certificates, and only 37 were too sick to understand their need for treatment and were certified at the time of admission. Four patients were received by transfer from other hospitals in the State, and one patient came from the Payne Whitney Psychiatric Clinic.

Most patients were referred by physicians in private practice. Most of the patients were well-educated and many held positions of leadership and responsibility in their communities. There were 4 engineers, 11 executives, 10 teachers, 6 creative artists, 8 lawyers, 38 students, and 129 homemakers and housewives.

DISCHARGES

Three hundred thirty-nine, 224 women and 115 men, were discharged during the year. Of these, 66, or 19 per cent, were considered recovered. Two hundred eighty-four of the total number discharged had either recovered or improved; thus 84 per cent of all patients discharged were definitely benefited by treatment.

Of all patients discharged, 154, or 45 per cent, had been in the hospital less than six months; 261, or 77 per cent, had been in the hospital less than one year.

The following table gives more detail as to the length of time patients were under treatment and their condition at the time of discharge:

DURATION OF HOSPITAL RESIDENCE OF PATIENTS DISCHARGED

		overed	Imf	uch		roved		nproved		ied *	T
Less than 6	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total
	1.2	24	25	24	-	2.4	4	16	4	6	154
months	13	24	25		6	34	4	10	4	-4	
6 to 12 mos.	6	14	17	32	8	19	5	5		1	107
1 to 2 years	3	6	9	17	2	14		6	2		59
2 to 3 years			1		2	1		1	1	2	8
3 to 4 years						2			2		4
4 to 5 years					2						2
More than											
5 years			2		1					2	5
,		_		_			_			_	
Total	22	44	54	73	21	70	9	28	9	9	339

^{*} Five of these patients died while on visit.





RECEPTION ROOM OUTPATIENT DEPARTMENT

TREATMENT

When a patient has been accepted for care and treatment, the nearest relatives are encouraged to visit the hospital and confer with members of the medical staff. The story of the development of the patient's difficulty is obtained, together with information as to the family and social background, the development of the personality and the setting in which the first symptoms appeared. The nature of the reaction and the methods of treatment are explained, and a tour of the halls and therapeutic facilities is conducted.

Patients are received on the admission halls of the men's and women's services. Each patient is assigned to a physician who is responsible for the examination and the direction of treatment. In the physical study of the patient, the aid of consultants in the different departments of surgery and medicine is utilized. The clinical laboratory study of each patient includes complete blood counts, urinalyses, blood chemistry examinations and blood serology tests. Other tests, such as electroencephalography, electrocardiography, and X-ray examinations are done when indicated. Any physical difficulties are treated or corrected. Provision is made for dental examinations, treatments, and periodic examinations of patients remaining in the hospital.

The physician in charge of each patient is responsible for the psychotherapy which is conducted by the interview method with emphasis on dynamic and interpretive psychiatry. With information from relatives and friends, and material from the patient's unburdenings and discussions, the reeducation process begins. The patient learns better ways of managing, changing many attitudes which can be changed, and achieving tolerance toward persisting traits and drives. Abundant time is devoted to members of the patient's family, friends and associates. Adjustments in the environment and better understanding on the part of the family and others are most helpful in the finer adjustments of recovered individuals. The psychologists assist in our understanding and treatment of patients, diagnostic testing, and avocational and vocational guidance. The social service department plays an important role in working with patients and their families from the beginning of the hospital treatment to the time of complete restoration and rehabilitation.

The medical staff continues to be so organized as to provide frequent consultation upon the problems of the individual patient. Six daily conferences are held each week in both the men's and women's departments, at which times the physicians, supervisors of nursing, psychologists, social workers, and the heads of the various program therapy departments discuss the condition, needs, treatment, and schedules of patients. The case histories of the newly admitted patients are presented and the moving of patients to more advanced halls, giving them increased responsibility, is discussed. Permission to visit away from the hospital, to begin commuting to work, and eventual planning for extended visit and discharge, are carefully considered in each individual case.

The concerted efforts of the physicians, nurses and other personnel of the hospital are directed toward making the patient feel comfortable and at home in the hospital. The newly admitted patient is given special attention by the nursing service. He is introduced to other patients and the schedules of meals, rest periods and hall and hospital program activities are explained.

In addition to the physical formalities of admission care, the nurses' attention is directed to the patient as a person in a planned social environment. The nursing staff is most interested in the whole patient and his entire life on the halls. This attitude is imparted to the affiliating students who, in addition to receiving lectures, demonstration and clinics, join the nursing staff in their daily work with patients. Patients take an active part in the social life and entertainments on the halls. At the afternoon teas on the women's service one of the patients acts as hostess, and patients from other halls are invited for these and other social occasions. Patients bring flowers from their hospital gardens, and on special holidays assist in the decoration of the halls. They arrange social gatherings for fashion shows and exhibits of their work and prepare attractive posters for coming events, such as special radio and television programs, hospital parties, movies, and dances. Recently the patients have started a newspaper under the guidance of the women's occupational therapy department.

Although many special diets must be prepared by the Department of Nutrition, the regular diet is substantial and nutritious for people who are living vigorous and active lives out-of-doors. The housekeeping department plays an important role in the care of the patients through attractive furnishings and living surroundings.

The physicians arrange the activities of each patient. In addition to the medical and nursing care, the patient is given physiotherapy, including massage and hydrotherapy, electric treatment such as ultra-violet and infra-red light, baking and diathermy. Prolonged baths and packs are measures for securing natural rest and preventing exhaustion from excitement and agitation.

The patient is placed on programs of occupational therapy and physical education. Here the socializing value of working and playing together and the satisfaction derived from constructive and useful activity are utilized. Many patients who work out intricate psychological problems with their physicians and who require very prolonged careful medical and nursing care will attribute their recovery to the various program therapies. They seem to win back their confidence and self-esteem, their feeling of belonging to the group and contributing to the group in these activities. The occupational therapy departments are in two well-equipped and well-staffed buildings. The activities for the men are carpentry, printing, heavy metal work, drawing and art, and assisting in the care of athletic equipment, fields and gardens. Through the cooperation of local merchants and agencies, classes in make-up and good grooming, table decorations, and gift wrapping, are given. The women enjoy sewing, modelling, art, weaving, leather work and gardening. The physical education department has access to two modern gymnasia, the athletic fields, and the salt water bathing at York Lodge which is located at Mamaroneck on Long Island Sound. Other activities include baseball, golf, tennis, croquet, paddle tennis, badminton, shuffleboard, touch football, and the indoor sports of basketball, bowling, ping pong, pool, dancing and corrective exercises. The program of social activities includes evening dances, motion pictures, salmagundi parties, sports nights, tournaments, and afternoon tea dances for the patients and their relatives.





As patients improve and move to more convalescent halls, they assume greater responsibility for their programs. Initiative and creative work are encouraged. The librarian, in cooperation with the physicians, helps in providing reading material. Patients arrange informal discussions on the halls and more formal book reviews and discussions in the library and hall parlors. Many patients take advantage of the music department. Group singing is popular but many patients work with real pleasure in individual instruction in voice and piano and other instruments. Sessions of recorded music are enjoyed and guest artists provide recitals and concerts throughout the year.

Convalescent patients are prepared gradually for leaving the hospital by a series of visits. At first they may go shopping with a relative in the city; this is followed by weekends at home and more prolonged visits, and many patients commute to their work for varying periods of time. This transitional period serves as an excellent test of the patient's successful readjustment. Many important problems are brought up for profitable discussion. Important manipulations of environmental factors are indicated and carried out with good effect. When vocational guidance has recommended a change in work, this period is most helpful. In this way confidence is securely restored and the gradual resuming of normal activity and relationships has proven most helpful in the complete rehabilitation of the patient.

SPECIAL TREATMENT PROCEDURES

Electric Shock Therapy. This form of treatment has continued as an important adjunct in our therapeutic approach to patients problems. During the year electric shock therapy was given to 59 men and 101 women. This form of treatment was very helpful in bringing patients rapidly to a state of responsiveness to psychotherapy and the various program therapies of the hospital. Doctors Landolt and Moorhead have been in charge of administering and instructing in this therapeutic procedure.

Insulin Therapy. During the year 51 patients received sub-shock insulin therapy. This form of treatment has continued to be most helpful in stimulating appetite, allaying anxiety, tension, and mild depression. The treatment was in the majority of cases combined with electric shock therapy.

Tranquilizing Drugs. Although the effectiveness of these drugs—reserpine, chlorpromazine, promazine, azacyclonol hydrochloride, mepazine, and meprobamate has been studied and carefully evaluated with controls and in certain instances apparently proven helpful, they have not been as effective as electric shock and insulin therapy.

PROGRAM THERAPIES

A variety of activities for patients as individuals and in groups is offered by the well-staffed departments and fully-equipped physical therapy facilities, gymnasia, occupational therapy buildings, the music department, and the library.

PHYSICAL THERAPY

Miss Durkin has continued in charge of the men's and women's physiotherapy departments with four assistants. The men's department carried out 15,785 treatments and the women's department carried out 37,101 treatments. One hundred thirty-six patients received 1,331 prolonged baths, and 142 patients received 1,824 packs. These procedures were administered on the halls by the nursing service.

OCCUPATIONAL THERAPY

The women's department is under the direction of Miss Smiley and her seven trained assistants. The men's department has continued under the direction of Mrs. Owen and her seven trained assistants. Two students from the University of Minnesota and one from the University of North Dakota, and two summer students, received psychiatric instruction and experience in occupational therapy.

PHYSICAL EDUCATION

Miss Phelan and Mr. Gorton have continued in charge of the women's and men's departments with their 11 assistants. The facilities of the two gymnasia, the playfields, spacious grounds, wooded walks, golf course, driving range and picnic grounds near the formal gardens, have been used. York Lodge has also been fully used.

MUSIC DEPARTMENT

Mr. Mills has continued in charge of the music department. Individual instruction in instrumental and vocal music was the major activity; 1,348 lessons were given to 123 patients during the year.

LIBR ARIES

Miss Wahrow has continued as librarian for both the patients' and the medical library. Five hundred fifty-five volumes were added to the patients' library so that at the end of the year an inventory showed 5,827 volumes with a yearly circulation of 11,734. Ninety periodicals were subscribed to for patients, 9 for the School of Nursing, and 61 for other non-medical departments.

One hundred fifty-six volumes were added to the medical library making a total inventory of 7,794 volumes. Subscriptions to 54 medical and psychological journals were continued.

CLINICAL AND X-RAY LABORATORIES

Dr. Clow has continued in charge of this increasingly active department. A total of 13,230 laboratory tests was made. All newly admitted patients have been studied, including blood counts, blood chemistry, urinalyses, and blood serology tests. Regular studies were made on patients receiving many of the special treatment procedures.

Examinations of our milk and water supplies have shown the usual high standards of quality and purity.

X-ray Laboratory. All necessary and indicated examinations of patients and employees have been made, including chest films on all newly admitted





POTTER'S WHEEL, MEN'S OCCUPATIONAL THERAPY

patients and new employees. These are repeated yearly. A total of 1,824 X-ray examinations was made.

Operating Room. There were 51 procedures carried out in the operating room including seven dental operations.

Electroencephalography. During the year 244 encephalograms were made.

Electrocardiography. Two hundred twenty-seven electrocardiographic studies were made.

Thyroid Function. There has been an increased tendency to determine thyroid function by a measurement of the protein-bound iodine in the blood serum. This has been more reliable than basal metabolic rates, particularly with tense, agitated or overactive patients.

Ketosteroid work. During the year ketosteroid studies have been made on 10 patients including studies before, during, and after electric shock therapy, before and after receiving ACTH, and on patients suffering from anorexia nervosa.

The following tables give details as to the work of this department:

CLINICAL LABORATORY

	Patients	Employees	Total
Bacteriology and Parasitology:			
Cultures:			
Water			12
Blood	1		1
Miscellaneous	17	77	94
Microscopic:			
Tuberculosis	4	6	10
Gonococci	200	2	202
Miscellaneous	13	-6	89
Chemistry: Blood	960	18	978
Feces	24	10	24
Gastric contents	1		1
Spinal fluid	10		10
1			
Cytology:			
Blood	4,046	472	4,518
Spinal fluid	6		6
Functional tests:			
	20	26	55
Basal metabolism Renal function	29 1	20	1
Miscellaneous	22		22
Miscellaneous	22		
Serology	295	326	621
Urine examinations:			
Routine	4,270	660	4.930
Bilirubin tests	1,667	1	1,668
	4		4
Post mortem examinations	4		-1

X-RAY LABORATORY EXAMINATIONS

	Patients	Employees	Total
* Head	31	28	59
† Thorax	354	838	1,192
Spine	212	12	224
Shoulder	14	18	32
Upper arm	10	4	14
Elbow	4	7	11
Forearm		3	3
Wrist and hand	30	51	81
Abdomen	10	22	32
Pelvis and hip joint	5	4	9
Thigh			
Knee	4	13	17
Leg	2	2	4
Ankle	30	20	50
Foot	8	11	19
Gastro-intestinal tract	9	15	24
Gall bladder	5	5	10
Genito-urinary tract	7	9	16
Fluoroscopic examinations	8	19	27
Teeth (complete examination)	278	12	290
Teeth (partial examination)	239	17	256

^{*} Inclusive of examination for skull, sinuses, jaw and nose. † Inclusive of examinations for lungs, heart, ribs and oesophagus.





MEDICAL STAFF EDUCATION PROGRAM

Dr. Prout has continued as Assistant Medical Director and Clinical Director, and Dr. Burdick and Dr. Hamilton have continued as physicians in charge of the women's and men's services. Dr. McKnight has been appointed physician in charge of the outpatient department.

In addition to the daily clinical conferences and the general staff conferences, the residents in training have had weekly conferences with the Medical Director and Clinical Director. The Monday Night Meetings have continued under the direction of Dr. Prout. Original studies, reports on research projects, reviews of current literature, and prepared scientific papers were presented and films for teaching purposes were shown. Visiting lecturers were invited. Courses in neuroanatomy, neuropathology and clinical neurology were given by Dr. Houston Merritt and his associates, at the hospital and at the New York Neurological Institute in New York City from January through April. Dr. Victoria Bradess and Dr. Tom Munro addressed the staff during the year.

Physicians in training have received instruction and experience in the psychiatric outpatient department of the Payne Whitney Clinic. This will be carried on in future in the outpatient department of the New York Hospital-Westchester Division. Transportation was furnished to all meetings concerning psychiatry and neurology held in New York City. The residents in training were encouraged to teach courses in psychiatry and hold clinics for the affiliating student nurses, and to address groups in the community.

Three fourth year medical students from Cornell University Medical College spent eight weeks at the hospital for study and supervised experience as an elective course.

Studies presented at the Monday Night Meetings included the following:

Electroencephalography by Dr. Clow;

Symposium on Adolescent Reactions by Drs. Lucile Ware, Hupalowsky and McKinley:

Artistic Ability and Mental Illness by Dr. Herbert;

Historical Concepts of Paraphrenia, Paranoia, Paranoid Condition and Paranoid Dementia Praecox by Dr. Moorhead;

Some Legal Aspects of Psychiatry by Dr. Prout;

Psychological Techniques—I.Q. Tests, Rorschach—Description and Evaluation T.A.T and Allied Tests, Tests for Organic Impairment by Mr. Foundeur;

Post-partum Psychoses by Mr. Foundeur;

Research-Methods-Standards and Evaluations by Dr. White;

Review of Current Literature on Tranquilizing Drugs by Drs. Hupalowsky and Nininger;

Symposium on Psychiatry and Religion by Drs. Feinstein, McKinley and Moorhead:

Symposium on Principles of Psychotherapy by Drs. O'Neil, Epple and Hamilton;

Review of Current Literature on Schizophrenia by Dr. Carson;

Review of "The Interpretation of Dreams"-Sigmund Freud by Dr. Wennert;

On November 12th a special meeting was held to which physicians of the community, psychiatrists, and occupational therapy workers of surrounding psychiatric hospitals were invited. The subject was *Prescribing Occupational Therapy*. The Medical Director, Miss Ruth Smiley and Mrs. Eleanor Owen were the speakers. Many contributed to the discussion.

TEACHING, CONSULTATION AND CLINICAL APPOINTMENTS

Dr. James H. Wall: Associate Professor of Clinical Psychiatry at Cornell University Medical College, Consulting Psychiatrist to the White Plains Hospital, the Grasslands Hospital, Valhalla, New York, and St. Luke's Convalescent Hospital, Greenwich, Connecticut, and Consultant in neuropsychiatry to the Phelps Memorial Hospital Association in North Tarrytown, New York.

Dr. Curtis T. Prout: Assistant Professor of Clinical Psychiatry at Cornell University Medical College, and Consulting Psychiatrist to the White Plains Hospital.

Dr. Edward B. Allen: Instructor in Psychiatry at Cornell University Medical College.

Dr. William K. McKnight: Instructor in Psychiatry at Cornell University Medical College.

Dr. Hollis E. Clow: Associate Attending Physician in the Division of Neurology at Grasslands Hospital, Valhalla, New York.

Dr. Edward B. Allen, Senior Assistant Psychiatrist, retired on June 30th after thirty-two years of service.

Dr. Philip S. Herbert, Jr., Senior Assistant Psychiatrist, resigned on June 30th to enter private practice in New York City.

Dr. Simeon L. Feigin, Assistant Resident Physician, completed two years of residency training on June 30th and resumed training in neurology at Bellevue Hospital.

Dr. William J. Hockaday, Jr., Assistant Resident Physician, completed one year of residency training on June 30th and returned to Louisville, Kentucky to continue his psychiatric training.

Dr. Lucile M. Ware, Assistant Resident Physician, completed two years of residency training on June 30th and joined the staff of the Albert Einstein Center, Psychiatric Department, New York City.

Dr. Helen M. Gray, Assistant Resident Physician, completed one year of residency training on June 30th and joined the staff of the Louisville (Kentucky) Child Guidance Center to continue training in child psychiatry.

Dr. Robert S. Carson was appointed Assistant Resident Physician on January 1st.



YORK LODGE

Dr. Kenneth Hall Epple was appointed Assistant Resident Physician on April 1st.

Dr. Esther Chang was appointed Assistant Resident Physician on July 1st and resigned on December 20th.

Dr. Howard M. Feinstein was appointed Assistant Resident Physician on July 1st.

Dr. Henry J. Lefkowits was appointed Assistant Resident Physician on July 1st.

Dr. Engel Scott Nininger was appointed Assistant Resident Physician on July 1st.

Dr. Heinz Wennert was appointed Assistant Resident Physician on July 1st.

NURSING SERVICE AND EDUCATION

The nursing service under the direction of Miss Sprogell has continued in its roles of patient care and in giving instruction and practical experience to nurses in training. During the year 301 affiliating student nurses received the twelve weeks' course in psychiatric nursing. The training schools from which these students were accepted were: The Flower-Fifth Avenue Hospital, Lenox Hill Hospital, Mount Sinai Hospital, Roosevelt Hospital, St. Luke's Hospital and Long Island College Hospital of New York City, St. John's Riverside Hospital, Yonkers, and the White Plains Hospital.

The Katherine F. Hearn Scholarship Committee met on April 20th. Eleven graduate nurses have availed themselves of the opportunities offered by this fund.

The Nursing Advisory Council for the affiliating schools met during the year.

On the last day of the year there were 226 members of the nursing personnel on duty including the director, three assistant directors, nine supervisors and instructors, 40 graduate nurses, 81 psychiatric aides, and 27 practical nurses, together with four special nurses. In addition there were 10 part time graduate nurses, two part time practical nurses, and 10 part time psychiatric aides. There were 66 affiliating student nurses.

PSYCHOLOGY DEPARTMENT

Dr. Mary Alice White has continued in charge of this department. A total of 394 patient evaluations was carried our including 78 patients who were referred for vocational and educational guidance. Research projects included a Control Study of Post-partum Illnesses, Effectiveness of Certain Tranquilizing Drugs, and research in various aspects of the Schizophrenic Reaction has continued.

SOCIAL SERVICE DEPARTMENT

Miss Eleanor Neustaedter has continued in charge with her four assistants. One hundred forty-eight patients have been referred to the social service de-

partment, 79 women and 69 men. Forty-seven patients were referred for help with their plans in leaving the hospital, including 33 for advice and direction concerning employment. The relatives of 96 patients have been assisted during the period of the illness of patients in an attempt to increase family understanding and constructive cooperation.

DENTAL DEPARTMENT

The dental department has continued under the care of Dr. Carroll assisted by Dr. Beck. All patients have received complete oral and X-ray examinations periodically. There was a total of 2,517 patients' visits to the department, and 4,646 operations were performed.

MEDICAL CARE OF PERSONNEL

Drs. Clow and Lynch have carried out the work of this department attending to the maintenance and promotion of health of the hospital personnel. During the year 331 complete physical examinations for new employees were made. There were 3,615 visits to the Employees' Clinic which was held daily. There were 241 admissions to the infirmary.

DEPARTMENT OF NUTRITION

Miss Randall has continued to direct the work of this department, having charge of the preparation of all meals for the patients and personnel together with the preparation of refreshments for patients' entertainments and all social functions of the hospital.

The County Health Department renewed the eating place permit following the annual inspection.

Many major repairs and replacements were made in the main kitchen.

HOUSEKEEPING DEPARTMENT

This department has continued under the direction of Miss Jacques who has supervised the work of all hall aides together with the work of the linen and sewing rooms, the upholstery shop, the serving of meals to all patients, and the refreshments at the parties and social functions of the hospital. This department also had charge of furnishing the outpatient department, a physician's cottage, and the staff house annex. Extensive renovations and decorations of halls for patients and personnel were carried out.

CIVIL DEFENSE

During the year the hospital has continued its civil defense program as it concerns patients and personnel and also in cooperation with the Office of Civil Defense in White Plains. Members of the staff have attended local civil defense meetings.

Miss Phelan gave the American Red Cross Standard First Aid course to personnel of the hospital during the year.





TABLE GAME AT SALMAGUNDI PARTY

SPECIAL EVENTS AND OTHER ITEMS OF INTEREST

On December 8th 350 guests attended the dedication exercises of the outpatient department. The speakers were: Mr. Edward W. Bourne, Chairman of the Westchester Division Committee of the Board of Governors, Dr. Daniel Blain, Medical Director of the American Psychiatric Association of Washington, D. C., Dr. Tom Munro, Medical Superintendent of the Royal Edinburgh Hospital for Mental and Nervous Diseases, Edinburgh, Scotland, and Dr. William K. McKnight, physician in charge of the outpatient department. The speakers were introduced by the Medical Director. A tour of the outpatient department and a luncheon in the lounge of the nurses' residence followed.

A bronze plaque honoring those who have loyally served the hospital for over fifteen years was erected in the main hall of the hospital.

On December 7th the Board of Governors gave a dinner in honor of physicians who were previously associated with the hospital and the medical staff. This was preceded by a tour of the hospital and the outpatient department.

Meetings. On March 13th District Number 16 of the Westchester County Nursing Association held a meeting here. There were 150 guests.

On April 9th the directors of nursing and members of the faculties from the various training schools whose students affiliate at this hospital for psychiatric instruction and experience, met at the hospital.

On April 25th as a part of Business-Education Day in White Plains, sponsored by the Education Committee of the Business and Civic Federation of White Plains, five teachers from the public schools of White Plains visited the hospital, were shown the various departments, and were entertained at lunch.

On May 26th the New York State Occupational Therapy Association held its annual meeting at the hospital; 75 members attended.

The Board of Governors of the Society of the New York Hospital held its regular monthly meeting at the hospital on June 5th, followed by dinner at the staff house.

The Medical Society of the County of Westchester held its regular monthly meetings at the hospital.

Inspection of the Hospital. Inspection of the hospital by representatives of the New York State Department of Mental Hygiene was made as follows: Dr. Hyman W. Abrahamer on January 17th; Dr. L. L. Bryan on April 17th; Dr. O. J. McKendree on June 27th; Dr. Richard V. Foster on October 8th; and Dr. L. L. Bryan on December 18th.

Visitors. Visits of friends and relatives to patients totaled 18,605: 11,262 to women patients, and 7,343 to men patients.

Four hundred twenty-eight former patients made 1,758 visits to the hospital and to our New York office at the Payne Whitney Clinic, a service given to patients during their first few months of readjustment in the community.

Groups of medical students from Cornell University Medical College visited the hospital on Saturday afternoons during March and April.

Seven resident physicians from the Payne Whitney Clinic visited the hospital on November 17th.

Religious Services. The Reverend Alfred C. Arnold of Grace Church, White Plains, died on April 8th after having served faithfully and loyally as chaplain of the hospital for over 19 years.

He was succeeded by the Reverend David B. Weden, Rector of Grace Church, White Plains. The Reverend Father Eugene A. Murtha and his assistant, The Reverend Father Thomas F. O'Connell of the Church of Our Lady of Sorrows, have attended to the religious comfort of the Roman Catholic patients.

ADDRESSES, PAPERS AND PUBLICATIONS

Dr. James H. Wall: Recent Advances in Modern Psychiatry, White Plains Rotary Club, White Plains, January 3rd; Anorexia Nervosa, published in the Bulletin of the New York Academy of Medicine, Volume 32, No. 2, February 1956; Problems in Schizophrenia, New York State Journal of Medicine, Volume 56, No. 18, September 15, 1956.

Dr. Curtis T. Prout: Recent Drugs in the Treatment of Mental Illness, Yonkers Academy of Medicine, Yonkers, New York, January 18th; The Schizophrenic's Sibling (with Dr. M. A. White), published in the Journal of Nervous and Mental Disease, Volume 123, No. 2, February 1956; Alcoholism (with Dr. E. B. Allen), Chapter in Progress in Neurology and Psychiatry, Volume XI, 1956; A Controlled Study of Reserpine in the Treatment of Mental Disease (with Dr. L. M. Ware), Bulletin of the New York Academy of Medicine, 2nd series, Volume 32, No. 9, September 1956; The Use of Electric Shock Therapy in Older Patients, Chapter in Mental Disorders in Later Life, 2nd Ed. 1956, Stanford U. Press, Stanford, California 1956.

Dr. Donald M. Hamilton: Mental Health Trends in Treatment. panel discussion, Church in the Highlands, White Plains, January 18th; Meeting the Emotional Needs of Children, Parent-Teacher Association, Mamaroneck Avenue School, White Plains, February 20th; The Psychotherapy of the Suicidal Patient (with Dr. Leonard Moss), published in American Journal of Psychiatry, Volume 112, No. 12, April 1956.

Dr. Hollis E. Clow: Mental Health in the Community, Lions Club of White Plains, June 14th; Psychiatric Problems of the Aging, Rensselaer County Medical Society, Troy, New York, November 13th; Psychiatry for Adults, Community Group, New Rochelle, New York, November 14th; Some Psychological and Psychiatric Problems of Old Age, panel discussion, published in Journal of American Geriatrics Society, Volume IV, No. 10, October 1956.

Dr. William K. McKnight: Marriage Counseling, Second Reformed Church, North Tarrytown, New York, February 5th; Growing Up Emotionally. Parent-Teacher Association, Rochambeau School, White Plains, March 27th; Woman's Role in Our Society (with Miss Kelly), Woman's Alliance of White Plains Community Church, White Plains, December 11th; Principles of Electroshock Therapy, part of a discussion published in Modern Medicine, March



DANCING CLASS

1956; Families Have Patients, Part 1, The Family and the Doctor. New York State Journal of Medicine, Volume 56, No. 15, August 1, 1956; Emotional Illness Occurring in Fathers Relating to Childbirth. Medical Times, June 1956.

Dr. Edward B. Allen: The Psychosomatic Problems of Aging, Westchester Academy of General Practice, White Plains, March 14th; Preparation for Later Years, Lions Club of Rye, New York, March 15th; Caring for the Aged, Adult Education Group at Eastview Junior High School, White Plains, April 10th; Personality Development. Burke Foundation, White Plains, May 29th; Psychotherapy, What It Is, and What It Isn't, staff of National Hospital for Speech Disorders, New York City, June 14th; Alcoholism (with Dr. Prout), Chapter in Progress in Neurology and Psychiatry, Volume XI, 1956; Some Psychological and Psychiatric Problems of Old Age, panel discussion, published in Journal of American Geriatrics Society, Volume IV, No. 10, October 1956.

Dr. Allison B. Landolt: A Follow-Up Study on Circular Manic-Depressive Reactions Occurring in the Young, Section on Neurology and Psychiatry, New York Academy of Medicine and New York Neurological Society, Academy of Medicine, New York, March 13th; published in the Bulletin of the New York Academy of Medicine, Volume 33, No. 1, January 1957.

Dr. Kenneth L. Crounse and Dr. James R. Ware, Jr.; A Study of Motives in the Psychopathic Personality, New York Academy of Medicine, New York, May 8th.

Dr. Mary Alice White: What is Good Discipline, Parent-Teacher Association, Valhalla School, North White Plains, New York, March 21st; Mental Health School Program, Westchester County school psychologists, White Plains, April 18th; Mental Health Needs, Scarsdale Visiting Nurses Association, Scarsdale, New York, May 24th; The Schizophrenic's Sibling (with Dr. C. T. Prout), Journal of Nervous and Mental Disease, February 1956; The Mental Health Commandments, Club Dial, Woman's Club of White Plains, October 1956.

Mr. Marvin Foundeur: Post-partum Mental Illness: A Controlled Study (bith Mr. C. Fixsen, Dr. M. A. White and Dr. William A. Triebel), Second Divisional Meeting, American Psychiatric Association, Montreal, Canada, November 8th.

Mr. Carl Fixsen: A Prognostic Index for Hospitalized Mental Patients (with Dr. M. A. White and Mr. M. Foundeur), annual meeting, American Psychological Association, Chicago, September 1st.

Miss Eleanor Neustaedter: Families Have Patients, Part II, The Family and the Social Worker, published in New York State Journal of Medicine, Volume 56, No. 15, August 1, 1956.

Miss Lillian Wahrow: Hospital Library Service to Psychiatric Patients, American Journal of Occupational Therapy, Volume IX, No. 6, November-December 1955.

Mr. Robert L. Mills: The Work of the Music Department at the New York Hospital-Westchester Division, Westchester County Chapter of American Guild of Organists, Crestwood, New York, October 16th.

PUBLIC RELATIONS DEPARTMENT

In addition to the fund-raising the publicity activities of this department under the direction of Mrs. Miller included the following radio programs arranged with the cooperation of the staff through the courtesy of Station WFAS, White Plains:

Miss Phelan and Mr. Gorton: Physical Education in Psychiatric Treatment, January 25th;

Miss Neustaedter: Social Service Aid to Mental Patients. February 22nd:

Dr. White, Mr. Foundeur and Mr. Fixsen: New Study on Mental Illness Following Childbirth, March 28th;

Dr. Clow: New Aids in Treatment, April 26th;

Dr. Allen: How to Grow Old, May 23rd:

Miss Wahrow: Books-A Bridge to Mental Health, June 28th;

Dr. White: Prognostic Study of Mental Illness, September 26th;

Dr. Hupalowsky: Nervous Exhaustion, October 24th;

Dr. McKnight: Emotional Breakdowns of New Fathers, November 28th;

Dr. Tom Munro of Edinburgh, Scotland: Reminiscences, December 26th;

IMPROVEMENTS AND MAINTENANCE

The X-ray department was completely renovated to meet modern standards at a cost of \$13,377,00.

An additional cottage for a physician and a staff house annex for resident physicians were constructed at a cost of approximately \$150,000.00.

A Springfield oil-fired, 484 horsepower boiler with auxiliary equipment, was purchased and installed in the power plant as a replacement for the coal-fired boiler at a cost of \$114,307.00.

An Allen electronic organ was installed in the assembly hall at a cost of \$4,360.00.

Extensive renovations and improvements in the main kitchen were made.

The various maintenance departments have made ordinary repairs and extensive improvements and replacements.

GIFTS

The many loyal and interested friends of the hospital contributed \$119, 297.10 during the year. A total of \$687,535.94 has been contributed since the appeal was begun in 1947. These gifts have enabled the hospital to increase the charitable work of restoring many worthwhile individuals whose families were unable to pay the full or even part of the cost of care, to expand research and teaching, to add many new facilities for treatment, to build new living quarters for the increased medical staff, and to carry on an extensive program of repairs and replacements.





FORMAL GARDENS

Mr. Louis Calder made a gift of \$25,000.00 to defray the annual cost of teaching in the nursing education program.

NEED!

The great need for trained workers in the field of psychiatry is a world-wide problem and challenge. This hospital, with its traditions for teaching, training, research, and setting standards of psychiatric care, is in a position to expand. Funds for housing personnel are needed. Halls for patients continue to be occupied by nurses and personnel; with other housing available, these halls could be used to begin our services to younger patients and to institute an entirely new program of day care in connection with the outpatient department.

Funds are needed for the installation of safety screens.

A residential treatment center for disturbed children with psychiatric disorders is needed.

The employees' food service should be consolidated in one main cafeteria for economy in operation.

It is hoped that these needs will come to the attention of public-spirited citizens so that the hospital may continue to advance in its programs of service to the community, teaching and research, and greatly assist the work of the outpatient department whose entire services will be devoted to patients unable to afford private psychiatric care.

For the high level of our standards of care and work in all departments, and for the many outstanding accomplishments of the year, the Medical Director wishes to thank individually the entire staff and personnel. To the Board of Governors and the members of the Westchester Division Committee I wish to express my gratitude for their unselfish service to the hospital and their constant support and guidance.

Respectfully submitted,

JAMES H. WALL, M.D.

Medical Director.





PLAQUE HONORING PERSONNEL OF HOSPITAL



GENERAL STATISTICS OF PATIENT POPULATION FOR THE YEAR ENDING DECEMBER 31, 1956

Total on books December 31, 1955	Men 169 122 47	Women 260 162 98	Tota! 429 284 145
Admitted during the year: First admissions ‡Readmissions Transfers	62 38 4	125 75	187 113 4
Total admitted	104	200	304
Total under treatment during the year	273	460	733
Discharged during the year: *As recovered *As much improved *As improved *As unimproved	19 47 15 7	43 65 55 23	62 112 70 30
As without mental disorder: Alcoholism Drug addiction Psychopathic personality Died Transferred	8 1 2 9 7	9 4 1 9 15	17 5 3 18† 22
Total discharged	115	224	339
Total remaining on books December 31, 1956 In hospital	158 122 36	236 158 78	394 280 114
Daily average population on the books	157	253	410
Daily average population excluding visits	118	168	286
Rated capacity of the hospital .	125	201	326
Voluntary cases admitted during the year: First admissions Readmissions	47 34	97 56	144 90
Physician's certificate cases admitted		2	2
Cases admitted on inebriate certification		1	1
Cases admitted on voluntary minor application	7	7	14
Voluntary cases certified for mental disorder	7	30	37
Voluntary cases certified on inebriate certification	9	16	25
Voluntary cases certified on physician's certificate	2	2	4
Physician's certificate cases certified	1		1
Voluntary minor cases certified	1	1	2
Voluntary patients on books at the end of the year	86	127	213
Average number on visit during the year	39	85	124

^{*} Exclusive of transfers and those without mental disorder.

[†] Of these, 5 patients died while on visit. ‡ Refers to previous admission to any hospital for mental disorder.



THE NEW YORK HOSPITAL—WESTCHESTER DIVISION

GENERAL TABLE OF STATISTICS Compiled from the Annual Reports of the Institution

Үевг	Whole Number Admitted	Admitted by Legal Procedure	Voluntary	Whole Number Treated during the Year	Whole Number Discharged during the Year	Recovered	Improved and much Improved	*Not Improved	Died	‡On Books at End of Year	Daily Average Number in Bospital.
1821 to 1893 1894 1894 1895 1896 1896 1896 1897 1898 1898 1898 1898 1898 1898 1898	9,365,241 1288 1451 1288 1391 1288 1391 1288 1391 1288 1391 1288 1391 1291 1291 1291 1291 1291 1291 1291	9.303 1288 1288 1288 1288 1288 1288 1288 128	221 221 221 221 222 222 222 222 222 222	433 434 444 436 437 434 431 431 431 442 451 461 477 472 461 477 472 461 472 461 473 474 475 477 477 477 477 477 477 477 477	9,003 144 126 116 116 116 116 116 117 117 117 117 11	3,635 40 40 40 40 40 40 40 40 40 40 40 40 40	2,4366 399 479 479 479 479 479 479 479 479 479 4	1,885 11 11 11 11 12 12 14 14 11 11 11 11 11 11 11 11 11 11 11	1,345 2 3 3 1 2 3 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	286 305 305 308 338 338 332 332 343 345 345 347 345 346 347 347 347 347 347 347 347 347 347 347	294 2994 2998 3128 3128 3313 3313 3313 3313 3313 331
	~ X.000	. 4,100	3,000		23,959	7,273	3.400	4,189	2,507		

^{*}Includes patients transferred.

^{*}From this year changes of status not included as in previous years.

Includes patients on visit.

INFORMATION RELATING TO THE ADMISSION OF PATIENTS

APPLICATIONS

Applications for the admission of patients may be made at the hospital at any time, or at our office in The New York Hospital, 525 East 68th Street. New York City, on any business day, at noon.

Information will be gladly given by telephone, but it is not customary to accept patients without the more careful inquiry made possible by an interview.

Applications should be made by personal call of some one who is prepared to describe the case, and to make the necessary arrangements.

An examination of the patient before admission is not required.

Application for the admission of patients at a distance may be made by telephone or by letter. A full description of the case and of the circumstances is required.

ADMISSION

The large majority of the patients sign their own applications on arrival at the hospital. Patients are also received on physician's certificate and on court authority as provided by the New York laws.

Patients who have been placed under the control of the hospital by court authority will, on request, be sent for. Others must be brought to the hospital.

CLASS OF PATIENTS

In the admission of patients, preference is given to those suffering from forms of nervous and mental disorders in which a favorable result from treatment may be reasonably expected.

Doubtful cases may be received for observation and diagnosis.

A very limited number of alcoholic and drug cases with a favorable outlook may be received under the provisions of the Mental Hygiene law.

Patients who seem likely to require an extended period of treatment may, when there is room and they are otherwise suitable, be received, for periods of study, at rates that will contribute to the support of the work of the hospital.

As the field of the hospital's activity must necessarily be limited and as a suitable social environment is essential to successful treatment, in the selection of cases for admission a good level of education, refinement and social adaptability is required.

TERMS

The rate charged depends upon the type of case, the attention required, and the accommodations desired.

Patients whose relatives are unable to pay the full cost may be received at low rates or without charge if the disorders from which they are suffering are recoverable and they are persons who come within the field of work in which The Society of the New York Hospital has found it can most usefully apply its resources. A large proportion of the patients thus received are professional men or women and members of their families. Preference is given to residents of New York State.

Extra charge is made for dental X-ray films and dental prophylaxis which are expected to be carried out for all patients. For other dental work and for surgical and other professional services that require specialists, extra charges are made for which, except in emergencies, approval is expected to be obtained in advance from the person responsible for the support of the patient in the hospital.

Consultations with family physicians and consulting specialists can, when desired, he arranged for after conference with the hospital physicians.

EXPRESSIONS OF APPRECIATION

Friends from time to time desire to express, by gifts to the Hospital, their appreciation of the treatment of patients and the work done by the Hospital.

The Medical Director will be pleased to give information concerning various needs of the Hospital that would come within the scope contemplated by the donor.

LEGACIES TO THE HOSPITAL.

No precise words are necessary to a valid legacy to the Society. The following clause, however may be suggested:

"I give to The Society of The New York Hospital, for the use of The New York Hospital—Westchester Division, the sum of _____dollars."

If land or any specific personal property, such as bonds, stocks, etc., is given, a brief description of the property should be inserted instead of the words "the sum of ______ dollars."









